

UNITED STATES BANKRUPTCY COURT
DISTRICT OF PUERTO RICO

N THE MATTER OF

ELIEZER REYES CASTRO

xxx-xx-6685
DEBTOR(S)

CASE NO: 17-04962-ESL

CHAPTER 13
ASSET CASE

STATEMENT OF PURPOSE OF AMENDED SCHEDULES I AND J

TO THE HONORABLE COURT:

NOW COMES, debtors through the undersigned attorney and very respectfully pray and state as follows:

1. Amended Schedule I is submitted to reflect changes in Debtor's income.
2. Amended Schedule J is submitted to reflect changes in Debtor's monthly expenses: *personal care and clothing.*

WHEREFORE, the Debtors respectfully requests from this Honorable Court to take notice of the amended Schedules.

I HEREBY CERTIFY: that on this same date a copy of this Motion was electronically filed by debtors using the CM/ECF System which will send a notification to the standing Chapter 13 Trustee and to all registered interested parties. In addition, a copy of this motion was sent by debtor's attorney to the debtors at the address of record and to all other creditors and parties in interest appearing in the master address list not registered in CM/ECF.

RESPECTFULLY SUBMITTED

IN CAROLINA, PUERTO RICO, DECEMBER 1, 2017.

/s/Ramón F. López
RAMON F. LOPEZ, ESQ. (203813)
RAMON F. LOPEZ LAW OFFICES, P.S.C.
PO BOX 34173
FT. BUCHANAN, PR 00934
PHONE 276-0196
ramonlopezlaw@gmail.com

Fill in this information to identify your case:

Debtor 1 ELIEZER REYES CASTRO

Debtor 2
(Spouse, if filing) _____

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO

Case number 17-04962-ESL
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

Employment status

Occupation

Employer's name

Employer's address

Debtor 1

- ☒ Employed
- ☐ Not employed

GROUP MANAGER

PREFERRED MORTGAGE CORP

San Juan, PR 00918

Debtor 2 or non-filing spouse

- ☐ Employed
- ☐ Not employed

How long employed there? 7 YRS.

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

For Debtor 1

For Debtor 2 or non-filing spouse

2. \$ 4,274.78 \$ N/A

3. +\$ 0.00 +\$ N/A

4. \$ 4,274.78 \$ N/A

Debtor 1 **ELIEZER REYES CASTRO**

Case number (if known) **17-04962-ESL**

	For Debtor 1	For Debtor 2 or non-filing spouse
4. Copy line 4 here	\$ 4,274.78	\$ N/A
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	\$ 754.49	\$ N/A
5b. Mandatory contributions for retirement plans	\$ 0.00	\$ N/A
5c. Voluntary contributions for retirement plans	\$ 0.00	\$ N/A
5d. Required repayments of retirement fund loans	\$ 0.00	\$ N/A
5e. Insurance	\$ 0.00	\$ N/A
5f. Domestic support obligations	\$ 0.00	\$ N/A
5g. Union dues	\$ 0.00	\$ N/A
5h. Other deductions. Specify:	\$ 0.00	\$ N/A
6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	\$ 754.49	\$ N/A
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	\$ 3,520.29	\$ N/A
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	\$ 754.17	\$ N/A
8b. Interest and dividends	\$ 0.00	\$ N/A
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	\$ 0.00	\$ N/A
8d. Unemployment compensation	\$ 0.00	\$ N/A
8e. Social Security	\$ 0.00	\$ N/A
8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	\$ 0.00	\$ N/A
8g. Pension or retirement income	\$ 0.00	\$ N/A
8h. Other monthly income. Specify:	\$ 0.00	\$ N/A
9. Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	\$ 754.17	\$ N/A
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	\$ 4,274.46	\$ N/A
11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify:		\$ 0.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies		\$ 4,274.46
		Combined monthly income
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain:	Debtor receives a disability compensation of \$654 from the Department of Veterans Affairs.	

Fill in this information to identify your case:

Debtor 1 ELIEZER REYES CASTRO

Debtor 2 _____
(Spouse, if filing)

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO

Case number 17-04962-ESL
(If known)

Check if this is:

- ☒ An amended filing
- ☐ A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Your Household

1. Is this a joint case?

☒ No. Go to line 2.

☐ Yes. Does Debtor 2 live in a separate household?

☐ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents? ☒ No

Do not list Debtor 1 and Debtor 2.

☐ Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Do not state the dependents names.

- ☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes
☐ No
☐ Yes

3. Do your expenses include expenses of people other than yourself and your dependents? ☒ No
☐ Yes

Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$ 839.00

If not included in line 4:

4a. Real estate taxes

4a. \$ 0.00

4b. Property, homeowner's, or renter's insurance

4b. \$ 0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$ 75.00

4d. Homeowner's association or condominium dues

4d. \$ 0.00

5. Additional mortgage payments for your residence, such as home equity loans

5. \$ 0.00

Debtor 1 **ELIEZER REYES CASTRO**

Case number (if known) **17-04962-ESL**

6. Utilities:		
6a. Electricity, heat, natural gas	6a. \$	75.00
6b. Water, sewer, garbage collection	6b. \$	40.00
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$	200.00
6d. Other. Specify: GAS	6d. \$	8.00
7. Food and housekeeping supplies	7. \$	250.00
8. Childcare and children's education costs	8. \$	0.00
9. Clothing, laundry, and dry cleaning	9. \$	35.00
10. Personal care products and services	10. \$	23.00
11. Medical and dental expenses	11. \$	200.00
12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments.	12. \$	700.00
13. Entertainment, clubs, recreation, newspapers, magazines, and books	13. \$	75.00
14. Charitable contributions and religious donations	14. \$	30.00
15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.		
15a. Life insurance	15a. \$	0.00
15b. Health insurance	15b. \$	0.00
15c. Vehicle insurance	15c. \$	33.00
15d. Other insurance. Specify: CANCER INSURANCE	15d. \$	65.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify:		
	16. \$	0.00
17. Installment or lease payments:		
17a. Car payments for Vehicle 1	17a. \$	866.00
17b. Car payments for Vehicle 2	17b. \$	0.00
17c. Other. Specify: ALARM	17c. \$	56.00
17d. Other. Specify:	17d. \$	0.00
18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).		
19. Other payments you make to support others who do not live with you.	18. \$	0.00
Specify: Family help to partner and sister	\$	275.00
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.		
20a. Mortgages on other property	20a. \$	0.00
20b. Real estate taxes	20b. \$	0.00
20c. Property, homeowner's, or renter's insurance	20c. \$	0.00
20d. Maintenance, repair, and upkeep expenses	20d. \$	0.00
20e. Homeowner's association or condominium dues	20e. \$	0.00
21. Other: Specify: CONTINUED EDUCATION REQUIREMENT	21. +\$	164.00
22. Calculate your monthly expenses		
22a. Add lines 4 through 21.	\$	4,009.00
22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2	\$	
22c. Add line 22a and 22b. The result is your monthly expenses.	\$	4,009.00
23. Calculate your monthly net income.		
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. \$	4,274.46
23b. Copy your monthly expenses from line 22c above.	23b. -\$	4,009.00
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. \$	265.46

24. Do you expect an increase or decrease in your expenses within the year after you file this form?
For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1 ELIEZER REYES CASTRO
First Name Middle Name Last Name

Debtor 2
(Spouse if, filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: DISTRICT OF PUERTO RICO

Case number 17-04962-ESL
(if known)

☐ Check if this is an amended filing

Official Form 106Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

☒ No

☐ Yes. Name of person _____ Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119)

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

X /s/ ELIEZER REYES CASTRO
ELIEZER REYES CASTRO
Signature of Debtor 1

X _____
Signature of Debtor 2

Date December 1, 2017

Date _____

17-04962-ESL13 ELIEZER REYES CASTRO

Case type: bk Chapter: 13 Asset: Yes Vol: v Bankruptcy Judge: ENRIQUE S. LAMOUTTE INCLAN

Date filed: 07/13/2017 Date of last filing: 10/25/2017

Creditors

BANCO POPULAR
PO BOX 362708 (4495987)
San Juan, PR 00936-2708 (cr)

BANCO POPULAR DE PUERTO RICO
SERVICER FOR GINNIE MAE I
MORTGAGE SERVICING DEPARTMENT (4511250)
PO BOX 362708 (cr)
SAN JUAN, PR 00936-2708

BEST BUY
PO BOX 78009 (4495988)
Phoenix, AZ 85062 (cr)

CHASE
PO BOX 15123 (4495989)
Wilmington, DE 19850 (cr)

CITI
PO BOX 6004 (4495990)
Sioux Falls, SD 57117 (cr)

Citibank, N.A.
701 East 60th Street North (4527269)
Sioux Falls, SD 57117 (cr)

COMENITY CAPITAL BANK
C/O Weinstein & Riley P.S. (4529993)
2001 Western Ave Ste. 400 (cr)
Seattle, WA 98121

DEPARTAMENTO DE HACIENDA
PO BOX 9024140 (4495991)
San Juan, PR 00902-4140 (cr)

DEPARTMENT OF TREASURY
BANKRUPTCY SECTION 424 B (4532746)
PO BOX 9024140 (cr)
SAN JUAN, PR 00902-4140

INTERNAL REVENUE SERVICE
PO BOX 7346 (4495992)
Philadelphia, PA 19101-7346 (cr)

MACYS
PO BOX 78008 (4495993)
Phoenix, AZ 85062 (cr)

ORIENTAL BANK

Centralized Collections Unit (4495994)
BOX 364745, (cr)
SAN JUAN, P.R. 00936-4745

PAYPAL CREDIT

PO BOX 105658 (4495995)
Atlanta, GA 30348 (cr)

PENDFED

PO BOX 247080 (4495996)
Omaha, NE 68124 (cr)

PENTAGON FEDERAL CREDIT UNION

PO BOX 456 (4495997)
Alexandria, VA 22313 (cr)

PENTAGON FEDERAL CREDIT UNION

PO BOX 1432 (4506108)
ALEXANDRIA, VA 22313 (cr)

POPULAR AUTO

PO BOX 15011 (4495999)
San Juan, PR 00902-8511 (cr)

POPULAR AUTO

PO BOX 15011 (4495998)
San Juan, PR 00902-8511 (cr)

POPULAR AUTO

BANKRUPTCY DEPARTMENT (4501316)
PO BOX 366818 (cr)
SAN JUAN PUERTO RICO 00936-6818

Quantum3 Group LLC as agent for

MOMA Funding LLC (4522208)
PO Box 788 (cr)
Kirkland, WA 98083-0788

SEARS

PO BOX 78051 (4496000)
Phoenix, AZ 85062 (cr)

SYNCHRONY BANK

PO BOX 960061 (4496001)
Orlando, FL 32896 (cr)

SYNCHRONY BANK

PO BOX 960090 (4496002)
Orlando, FL 32896 (cr)

T-MOBILE

654 AVE MUNOZ RIVERA (4496003)
SUITE 2000 (cr)
San Juan, PR 00918

WYNDHAM

6277 SEA HARBOR (4496004)
(cr)

Orlando, FL 32821

PACER Service Center			
Transaction Receipt			
12/01/2017 16:57:12			
PACER Login:	ramon123:2700030:0	Client Code:	
Description:	Creditor List	Search Criteria:	17-04962-ESL13 Creditor Type: All
Billable Pages:	1	Cost:	0.10